

Procter & Gamble - I.P. Division**IMPORTANT CONFIDENTIALITY NOTICE**

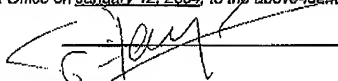
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**FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8****TO: Examiner L. M. Douyon - United States Patent and Trademark Office**

Fax No. 571-273-1313

Phone No.

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on January 12, 2004, to the above-identified facsimile number.


_____(Signature)**FROM: Thibault Fayette, Esq.**

Fax No. 513-627-8118

Phone No. 513-627-4593

Listed below are the item(s) being submitted with this Certificate of Transmission:**

- 1) Limited Recognition Under 37 CFR § 10.9(b)
- 2) Fee Transmittal Sheet (In duplicate)
- 3) Petition for Express Abandonment (In dupl.)

Inventor(s): Cates et al.

S.N.: 10/087,317

Filed: March 1, 2002

Case: 8442

Number of Pages including this Page: 6

Comments:**OFFICIAL PAPERS**

**Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

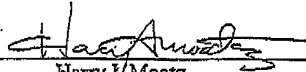
**BEFORE THE OFFICE OF ENROLLMENT AND DISCIPLINE
UNITED STATE PATENT AND TRADEMARK OFFICE**

LIMITED RECOGNITION UNDER 37 CFR § 10.9(b)

Thibault Fayette is hereby given limited recognition under 37 CFR § 10.9(b) as an employee of the Proctor & Gamble Company to prosecute patent applications in which the Proctor & Gamble Company is the assignee of all right, title and interest. This limited recognition shall expire on the date appearing below, or when whichever of the following events first occurs prior to the date appearing below: (i) Thibault Fayette ceases to lawfully reside in the United States, (ii) Thibault Fayette's employment with the Proctor & Gamble Company ceases or is terminated, or (iii) Thibault Fayette ceases to remain or reside in the United States on an H-1 visa.

This document constitutes proof of such recognition. The original of this document is on file in the Office of Enrollment and Discipline of the U.S. Patent and Trademark Office.

Expires: October 1, 2004



Harry J. Moatz
Director of Enrollment and Discipline

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
PTO/SB/17 (1003)

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FEE TRANSMITTAL
for FY 2004

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/087,317
Confirmation Number	2100
Filing Date	March 1, 2002
First Named Inventor	Cates et al.
Examiner Name	NOT YET ASSIGNED
Art Unit	3713
Attorney Docket No.	8442

TOTAL AMOUNT OF PAYMENT (\$)130.00**METHOD OF PAYMENT**

1. ☒ The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:

Deposit Account Number: 16-2489

Deposit Account Name: The Procter & Gamble Company

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Code	(5)	Fee Description	Fee Paid
1051	130	Surcharge-late filing fee or oath	<input type="checkbox"/>
1052	50	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>
1053	130	Non-English specification	<input type="checkbox"/>
1812	2,520	For filing a request for <i>ex parte</i> reexamination	<input type="checkbox"/>
1804	920*	Requesting publication of SIR prior to Examiner's action	<input type="checkbox"/>
1805	1,840*	Requesting publication of SIR after Examiner's action	<input type="checkbox"/>
1251	110	Extension for reply within 1 st month	<input type="checkbox"/>
1252	420	Extension for reply within 2 nd month	<input type="checkbox"/>
1253	950	Extension for reply within 3 rd month	<input type="checkbox"/>
1254	1,480	Extension for reply within 4 th month	<input type="checkbox"/>
1255	2,010	Extension for reply within 5 th month	<input type="checkbox"/>
1401	330	Notice of Appeal	<input type="checkbox"/>
1402	330	Filing a brief in support of an appeal	<input type="checkbox"/>
1403	290	Request for oral hearing	<input type="checkbox"/>
1451	1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
1452	110	Petition to revive - unavoidable	<input type="checkbox"/>
1453	1,330	Petition to revive - unintentional	<input type="checkbox"/>
1501	1,330	Utility issue fee (or reissue)	<input type="checkbox"/>
1502	480	Design issue fee	<input type="checkbox"/>
1460	130	Petitions to the Commissioner	<input type="checkbox"/>
1807	50	Processing fee under 37 C.F.R. 1.17(g)	<input type="checkbox"/>
1806	180	Submission of Information Disclosure Statement	<input type="checkbox"/>
1809	770	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="checkbox"/>
1810	770	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="checkbox"/>
1801	770	Request for Continued Examination (RCE)	<input type="checkbox"/>
1802	900	Request for expedited examination of a design application	<input type="checkbox"/>
1454	1330	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	<input type="checkbox"/>
Other fee (specify) _____			<input type="checkbox"/>
Other fee (specify) _____			<input type="checkbox"/>

* Reduced by Basic Filing Fee Paid **SUBTOTAL(3) (\$)**130**FEE CALCULATION****1. BASIC FILING FEE - Large Entity**

Code (5)	Fee Description	Fee Paid
1001	770	Utility filing fee <input type="checkbox"/>
1002	340	Design filing fee <input type="checkbox"/>
1004	770	Reissue filing fee <input type="checkbox"/>
1005	160	Provisional filing fee <input type="checkbox"/>

SUBTOTAL (2) (\$)0**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE - Large Entity**

		Extra Claims	Fee from Below	Fee Paid
Total Claims	<input type="checkbox"/> - 20** =	<input type="checkbox"/> x	<input type="checkbox"/>	<input type="checkbox"/>
Independent Claims	<input type="checkbox"/> - 3** =	<input type="checkbox"/> x	<input type="checkbox"/>	<input type="checkbox"/>
Multiple Dependent			<input type="checkbox"/>	<input type="checkbox"/>

** or number previously paid, if greater; For Reissues, see below

Code (5)	Fee Description
1202	18 Claims in excess of 20
1201	86 Independent claims in excess of 3
1203	290 Multiple dependent claim, if not paid
1204	86 **Reissue independent claims over original patent
1205	18 **Reissue claims in excess of 20 & over original patent

SUBTOTAL (2) (\$)0**SUBMITTED BY**

Name (Print/Type)

Thibault Fayette

Signature

Complete (if applicable)

Telephone (513) 627-4593

Date January 12, 2004

This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.18. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Correspondence for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Form 2004-01 (Revised for P&G use 9/22/2003)

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Attorney Docket No.	8442
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Deposit Account Number: 16-2480

Deposit Account Name: The Procter & Gamble Company

FEE CALCULATION (continued)

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1454	1330	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	<input type="checkbox"/>
		Other fee (specify)	<input type="checkbox"/>
		Other fee (specify)	<input type="checkbox"/>

FEE CALCULATION

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Code (\$)	Fee Description	Fee Paid
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1004	770	Reissue filing fee <input type="checkbox"/>
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SUBTOTAL (1) (\$)[0]

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE - Large Entity

Total Claims	Extra Claims	Fee from Below	Fee Paid
1202 18	Claims in excess of 20 <input type="checkbox"/> x <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1204 86	Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1205 18	Multiple Dependent <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

** or number previously paid, if greater; For Reissues, see below

Code (\$)	Fee Description
1201 86	Independent claims in excess of 3
1203 290	Multiple dependent claim, if not paid
1204 86	**Reissue independent claims over original patent
1205 18	**Reissue claims in excess of 20 & over original patent

SUBTOTAL (2) (\$)[0]

* Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)[130]

SUBMITTED BY

Name (Print/Type)

Thibault Fayette

Signature

Complete (if applicable)

Telephone (513) 627-4593

Date

January 12,

2004

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Form 2004 (Revised for P&G use 9/22/2003)